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PTO/SB/22 (12-04)
Approved for use through 07/31/2005. OMD 0651-0631
U.S. Matent and Trademark Office; U.S. DEPARMENT OF COMMERCE

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ETITION FOR EXTENSION OF TIME UNDER	Docket Number (Optional)			
(Foos pursuant to the Consolidated Appropriations Ac	1057680 (2003-U1409-US2)			
Application Number 10/771,387	Filed 12/15/2003			
or Engine Mount				
Art Unit 3611		Examiner	BOEHLER, Anne Marie M.	
This is a request under the provisions of 37 CFR 1.13 application.			ŀ	
he requested extension and fee are as follows (che	ck time period desired	and enter the appr	opriate tee below).	
	<u>Fee</u>	Small Entity F	<u>ee</u>	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$450.00	
Three months (37 CFR 1 17(a)(3))	\$1020	\$510	s	
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	s	
Five months (37 CFR 1.17(a)(5))	\$216 0	\$1080	s	
Applicant claims small entity status. See 37 CFR	R 1.27.	02/14/2006	TL0111 00000039 1077138	
A check in the amount of the fee is enclosed	02/1//2000	, , , , , , , , , , , , , , , , , , , ,		
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Payment by credit card. Form PTO-2038 is	attached.			
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This collection of information is required by 37 CFR 1 136(a). The information is required to obtain or retain a benefit by the public which is to the (and by the USFTO to process) an expectation. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time with early depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Potent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA 22313-1450.

FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SR/17 (01-08)
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Under the Paperv	ork Reduction Act of 19	95 no persons are re	quired to res	pond to a collectio	n of intorn:	apou nujeses	il displays p	ARTMENT OF COMMERCE Veild OMB control number				
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4018). FEE TRANSMITTAL				Complete if Known								
				Application Number 10/771,387								
				Filing Date 02/05/			2004					
	For FY	2006	1	First Named In	ventor 1	MASSICO	TTE, Ala	ın				
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name BOEHLER, Anne Ma				łarie M.				
				Art Unit		3611						
TOTAL AMOUN	T OF PAYMENT	(\$) 450		Attorney Docke	t No 1	1057680 (2003-014	I09-US2)				
METHOD OF PAYMENT (check all that apply)												
Chuck Credit Card Money Order None Other (please identify);												
Deposit Account Deposit Account Number 502977 Deposit Account Name Ogler, Hoskin & Harcount												
For the at	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Ch	arge fee(s) indicated	l below		Char	oe fee(s) i	ndicated b	elow nace	ept for the filing foo				
	arge any additional (ee(s) or underpayi	nents of fee	=		rpayments		prior pic ming les				
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FEE CALCUL	ATION (All the fe	s below are du	e upon fil	ing or may be	subject	to a sur	charge.)					
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Design	200	100	100	50	130							
Plant	200	100	300	150	160							
Reissue	300	150	500	250	600	300)					
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sheets or t	fraction thereof. S	cc 35 U.S.C. 41(a)(1)(G) a	nd 37 CFR 1.1	l G(s).		-27					
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Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)												
Other (e.g., late filing surcharge): Ext. 2-months (\$450) 450												
SUBMITTED BY												
Signaturo	100	Clex-	F	Registration No.	0,576	ŀ	Telephone	514-904-5624				
Name (Print/Type)	Jonathan D. Cutter	·		ALWINE WAGGILL)	-			EloZON-				

This collection of information is required by 37 CFR 1.138. The information is required in obtain or rotain a benefit by the public which is to tile (and by the USPTO to processe) an application. Confining figure and by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Tario will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chipf information Officer, U.S. Patient and Trideninal Officer, U.S. Domartee, P.O. Box 1450, Alexandria, V.A. 29313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, V.A. 22313-1450.

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